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CONFIRMATION NO. 7906

<b>SERIAL NUMBER</b> 09/476,485	<b>FILING OR 371(c) DATE</b> 12/30/1999 <b>RULE</b>	<b>CLASS</b> 424	<b>GROUP ART UNIT</b> 1644	<b>ATTORNEY DOCKET NO.</b> 108.236.119
<b>APPLICANTS</b> M. Gabriella Colucci, La Jolla, CA; Maarten J. Chrispeels, La Jolla, CA; Jeffrey G. Moore, Kennebunkport, ME;				
<b>** CONTINUING DATA *****</b> This application is a CIP of 08/881,189 06/24/1997 PAT 6,310,195 <i>MB</i>				
<b>** FOREIGN APPLICATIONS *****</b> <i>None</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 02/09/2000</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>MB</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 41	<b>TOTAL CLAIMS</b> 61
		<b>INDEPENDENT CLAIMS</b> 7		
<b>ADDRESS</b> 23483				
<b>TITLE</b> PROGENITOR CELL PRESERVATION FACTORS AND METHODS FOR AND PRODUCTS OF THEIR USE				
<b>FILING FEE RECEIVED</b> 1455	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	